BEST AVAILABLE COPY

Effective October 1, 2000

Application or Docket Number

0 9 733033

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL 01 11110			(Column 1)		(Column 2)			TYPE		OR	SMALL	•	
TOTAL CLAIMS			21					RATE	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	SASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			√ minus 20=		*			X\$ 9=		OR	X\$18=	18	
INDEPENDENT CLAIMS			6 minus 3 =		· 3			X40=		OR	X80=	240	
MULTIPLE DEPENDENT CLAIM PRESENT							T	+135=		OR	+270=	· · · · · · · · · · · · · · · · · · ·	
* If the difference in column 1 is less than zero, enter "0" i						olumn 2	L	TOTAL		OR	TOTAL	968	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus			=		X40=		OR	X80=		
_	11101111202			LINDEIN	CLAIN			+135=		OR	+270=		
L							-	TOTAL ODIT. FEE		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)										ADDIT. FEE		
	-25.000.000.00	CLAIMS	3.00 (A) (A) (A)	HIGH		(Ooldinin 3)			ADDI-	1 1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT	esa. A	NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	-	
	Independent	* .	Minus	***		=	T	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OH			
		•					L	+135=		OR	+270=		
							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		`											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T OL ALLA	<u> -</u>		X40=		OR	X80=		
_	rinoi PHESE	NTATION OF M	CLIPLE DE	CNDEN	LAIM		-	+135=		OR	+270=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												